

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: CLEAR SPRING FOOD INC.

ADDRESS: P.O. BOX 712
BUHL, ID 83316

FACILITY: CLEAR SPRINGS FOODS INC - FISH PROCESSING PLANT II

LOCATION: 1581 CLEAR LAKE ROAD
BUHL, ID 83316

ATTN: JOHN R. MacMILLAN, VP

IDG132001

PERMIT NUMBER

SUM-A

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

4/1/2014

MM/DD/YYYY

4/30/2014

DMR Mailing ZIP CODE:

83316

MINOR

(SUBR 05)

FACILITY TOTAL

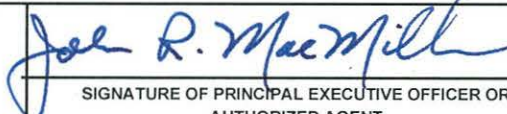
Sum

MAY 20 2014

No Discharge



PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. centigrade	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****				
00010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	*****	deg C		Monthly	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT				*****						
00310 1 0 Effluent Gross	PERMIT REQUIREMENT	27.2 MO AVG	54.4 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
pH	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	9 MAXIMUM	SU		Monthly	GRAB
Solids, total suspended	SAMPLE MEASUREMENT				*****						
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	27.2 MO AVG	54.4 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
Nitrogen, ammonia total [as N]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****					
00610 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
Phosphorus, total [as P]	SAMPLE MEASUREMENT				*****						
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	3.3 MO AVG	6.6 DAILY MX	lb/d	*****	Req. Mon. MO AVG	7.8 DAILY MX	mg/L		Monthly	COMP24
Oil and grease	SAMPLE MEASUREMENT				*****						
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	14.5 MO AVG	29 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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MM/DD/YYYY

4/1/2014

MM/DD/YYYY

4/30/2014

DMR Mailing ZIP CODE:

83316

MINOR

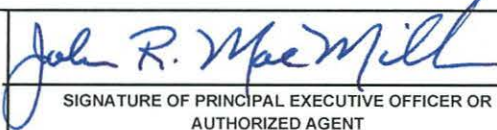
(SUBR 05)

FACILITY TOTAL

Sum

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	*****			*****	*****	*****	*****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfs	*****	*****	*****	*****		Monthly	MEASRD
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****						
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	11 MO AVG	19 DAILY MX	ug/L		Monthly	GRAB

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JOHN R. MacMillan Vice President			208-543-3456	05/09/2014
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

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ATTN: JOHN R. MacMILLAN, VP

IDG132001	SUM-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
3/1/2014	3/31/2014

DMR Mailing ZIP CODE:

83316

MINOR

(SUBR 05)

FACILITY TOTAL


Sum

APR 18 2014

No Discharge



PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. centigrade	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****				
00010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	*****	deg C		Monthly	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT				*****						
00310 1 0 Effluent Gross	PERMIT REQUIREMENT	27.2 MO AVG	54.4 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
pH	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	9 MAXIMUM	SU		Monthly	GRAB
Solids, total suspended	SAMPLE MEASUREMENT				*****						
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	27.2 MO AVG	54.4 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
Nitrogen, ammonia total [as N]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****					
00610 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
Phosphorus, total [as P]	SAMPLE MEASUREMENT				*****						
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	3.3 MO AVG	6.6 DAILY MX	lb/d	*****	Req. Mon. MO AVG	7.8 DAILY MX	mg/L		Monthly	COMP24
Oil and grease	SAMPLE MEASUREMENT				*****						
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	14.5 MO AVG	29 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	GRAB

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TYPED OR PRINTED			208-543-3456	04/10/2014
			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



DISCHARGE MONITORING REPORT (DMR)

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LOCATION: 1581 CLEAR LAKE ROAD
BUHL, ID 83316

ATTN: JOHN R. MacMILLAN, VP

IDG132001

PERMIT NUMBER

SUM-A

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

3/1/2014

MM/DD/YYYY

3/31/2014

DMR Mailing ZIP CODE:

83316

MINOR

(SUBR 05)

FACILITY TOTAL


Sum

No Discharge



PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	*****			*****	*****	*****	*****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfs	*****	*****	*****	*****		Monthly	MEASRD
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****						
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	11 MO AVG	19 DAILY MX	ug/L		Monthly	GRAB

APR 18 2014

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JOHN R. MacMILLAN Vice President			208-543-3456	04/10/2014
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

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LOCATION: 1581 CLEAR LAKE ROAD
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ATTN: JOHN R. MacMILLAN, VP

IDG132001

PERMIT NUMBER

SUM-A

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

2/1/2014

MM/DD/YYYY

2/28/2014

DMR Mailing ZIP CODE:

83316

MINOR

(SUBR 05)


FACILITY TOTAL

Sum

MAR 24 2014

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. centigrade	SAMPLE MEASUREMENT	*****	*****	*****	*****		*****				
00010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. MO AVG	*****	deg C		Monthly	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT				*****						
00310 1 0 Effluent Gross	PERMIT REQUIREMENT	27.2 MO AVG	54.4 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
pH	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	9 MAXIMUM	SU		Monthly	GRAB
Solids, total suspended	SAMPLE MEASUREMENT				*****						
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	27.2 MO AVG	54.4 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
Nitrogen, ammonia total [as N]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****					
00610 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	mg/L		Monthly	COMP24
Phosphorus, total [as P]	SAMPLE MEASUREMENT				*****						
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	3.3 MO AVG	6.6 DAILY MX	lb/d	*****	Req. Mon. MO AVG	7.8 DAILY MX	mg/L		Monthly	COMP24
Oil and grease	SAMPLE MEASUREMENT				*****						
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	14.5 MO AVG	29 DAILY MX	lb/d	*****	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	GRAB

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JOHN R. MacMillan Vice President			208-543-3450	03/12/2014
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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IDG132001	SUM-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
2/1/2014	2/28/2014

DMR Mailing ZIP CODE:

83316

MINOR

(SUBR 05)


FACILITY TOTAL

Sum

MAR 24 2014

No Discharge ☒

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	*****			*****	*****	*****	*****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfs	*****	*****	*****	*****		Monthly	MEASRD
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****						
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	11 MO AVG	19 DAILY MX	ug/L		Monthly	GRAB

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1/1/2014	1/31/2014

DMR Mailing ZIP CODE: 83316

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(SUBR 05)

FACILITY TOTAL

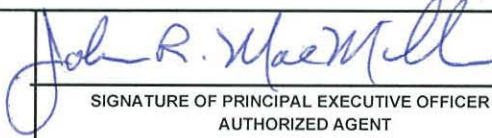
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FEB 24 2014

No Discharge



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JOHN R. MacMillan Vice President			208-543-3456	02/10/2014
TYPED OR PRINTED			AREA Code	NUMBER

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1/1/2014	1/31/2014

DMR Mailing ZIP CODE: 83316

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FACILITY TOTAL

Sum

FEB 24 2014

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	*****			*****	*****	*****	*****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	cfs	*****	*****	*****	*****		Monthly	MEASRD
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****						
50060 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	11 MO AVG	19 DAILY MX	ug/L		Monthly	GRAB

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